Commandant United States Coast Guard 2100 Second Street SW Washington, DC 20593-0001 Staff Symbol: G-WKH-2 Phone: (202) 267-0694

COMDTINST 6570.1A

COMMANDANT INSTRUCTION 6570.1A

Subj: STANDARDIZED HEALTH SERVICES TECHNICIAN DRUG FORMULARY

- 1. <u>PURPOSE</u>. This Instruction updates the list of medications that Coast Guard Health Services Technicians may prescribe.
- 2. <u>ACTION</u>. Area and district commanders, commanders of maintenance and logistics commands, commanding officers of headquarters units, assistant commandants for directorates, Chief counsel and special staff offices at Headquarters shall ensure compliance with the contents of this Instruction. Internet release authorized
- 3. <u>DIRECTIVES AFFECTED</u>. Standardized Health Services Technician Drug Formulary, COMDTINST 6570.1 is hereby cancelled.
- 4. <u>BACKGROUND</u>. Throughout their careers, Health Services Technicians are assigned to a variety of shore clinics and afloat units, utilizing differing drug formularies. Unfamiliarity with the various drug formularies places an unnecessary burden on Health Services Technicians upon their arrival at new duty stations. The Standardized HS Formulary minimizes these differences, promotes consistency of patient care among Coast Guard clinics, and facilitates the training of Health Services Technicians.
- 5. <u>POLICY</u>. The Standardized HS Formulary lists medications that Health Services Technicians may prescribe without an authorized prescriber's (physician, dentist, physician assistant, nurse practitioner, etc.) signature or countersignature. Authorization to prescribe other medications must be designated in writing by the Chief, Health Services Division of the clinic, or the Designated Medical Officer Advisor for Independent Duty HSs. For purposes of this instruction only, the term "formulary" refers to the list of medications contained in the Standardized Health Services Technician Formulary (enclosure [1] to this instruction); "non-formulary" refers to all other medications not listed in it. The following restrictions apply:
 - a. Health Services Technicians may prescribe formulary medications for active duty patients only. All prescriptions written by Health Services Technicians for non-active duty patients, or for non-DISTRIBUTION SDL No. 139

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formulary medications for all patients, shall be signed or countersigned by an authorized prescriber prior to dispensing.

- b. Quantities of prescribed medications shall be limited to normal "course of illness", usually a 5-7 day supply without refills. Medication required for chronic problems (allergies, etc.) shall be signed or countersigned by an authorized prescriber.
- c. Prescriptions received for an active duty member, from an authorized prescriber by an after-hours duty section, via the telephone, for non-formulary items shall be signed by the authorized prescriber on the next duty day.
- d. Consultation with or referral to a medical or dental officer is required should a patient, initially evaluated and treated by a Health Services Technician, return for the same problem.
- e. Formulary items shall be prescribed only for medical indications approved by the Food and Drug Administration and listed in the manufacturers' package insert.
- f. Health Services Technicians performing isolated duty at LORAN stations or underway on vessels may

also prescribe additional drugs required for their unit's active duty patients. Refer to COMDTINST M6700.5C, Health Services Allowance List, Ashore; or COMDTINST M6700.6E, Health Services Allowance List, Afloat.

6. RESPONSIBILITIES.

- a. Commandant (G-WKH) will review the Standardized HS Formulary annually and update as needed. Recommendations may be made to Commandant (G-WKH-2) via cognizant Maintenance and Logistics Command (k).
- b. Unit commanding officers shall ensure the Health Services Technicians review the Standardized HS Formulary annually.
- c. Designated supervising medical officers shall ensure that the Health Services Technicians they are responsible for are thoroughly familiar with the precautions, indications, adverse reactions, contraindications, and significant drug interactions of each medication listed in the Standardized HS Formulary. Commanding officers or senior medical officers have the option to remove items from the formulary as necessary, or terminate prescribing privileges for any individual. Any such restriction of prescribing privileges shall be documented by a page 7 entry in the member's Coast Guard Personnel Record.
- 7. <u>CHANGES</u>. All changes to this Instruction will be promulgated by consecutively numbered changes. Additions, deletions, and other changes will be published via ALCOAST.

8. <u>DISTRIBUTION</u>. No paper distribution will be made of this Instruction. Official distribution will be via the Coast Guard Directives System CD-ROM and the Department of Transportation website http://isddc.dot.gov/. An electronic version will also be made available via the Commandant (G-WK) Publications and Directives website http://www.uscg.mil/hq/G-W/g-wk/g-wkh/g-wkh-1/Pubs/Pubs.Direct.htm. Enclosure (1) may be downloaded and locally reproduced for inclusion directly into the unit formulary. However, clinics are encouraged to create a more comprehensive HS Formulary, which includes additional prescribing information, as a learning tool for the clinic staff. Subject matter contained herein shall be implemented into the HS "A" School curriculum.

JOYCE M. JOHNSON Director of Health and Safety

Encl: (1) Standardized Health Services Technician Formulary

STANDARDIZED HEALTH SERVICES TECHNICIAN FORMULARY

01 September 2002 Edition

- Liquid dosage forms of medications may be substituted when necessary.
- Generic equivalents (FDA "AB"-rated) may be substituted for brand name products.
- With the use of prime vendor procurement, information on procurement and container quantities will no longer be included on this document.
- All products selected for HS prescribing must be chosen from this enclosure, unless designated in writing by the Chief, Health Services Division of the clinic, or the Designated Medical Officer Advisor for Independent Duty HSs.

GENERIC NAME BRAND NAME

ANALGESIC PRODUCTS

ACETAMINOPHEN TABS 325 MG

ASPIRIN TABS 325 MG USP

ASPIRIN, DELAYED RELEASE, 325 MG

ECOTRIN

ANTI - INFLAMMATORY PRODUCTS

IBUPROFEN 200 MG TABS

IBUPROFEN 400 MG TABS, USP

IBUPROFEN 600 MG TABS, USP

IBUPROFEN 800 MG TABS

MOTRIN

IBUPROFEN 800 MG TABS

MOTRIN

NAPROXEN 250 MG TABS

NAPROSYN

NAPROSYN

NAPROSYN

ASTHMA PRODUCTS

ALBUTEROL SULF INHALATION SOLN 0.083%

ALBUTEROL INHALER *

PROVENTIL/VENTOLIN

PROVENTIL/VENTOLIN

PROVENTIL/VENTOLIN

ADRENALIN

NEBULIZER, FOR ALBUTEROL

SODIUM CHLORIDE INHAL SOL'N 0.9%, 5 ML

SPACER DEVICE FOR ALBUTEROL

SOLIUM CHARDER ALBUTEROL

SALINE NEBULIZING SOL'N

AEROCHAMBER/INSPIREASE

COUGH AND COLD PRODUCTS

BENZONATE 100 MG GEL CAPS TESSALON PERLES CETYLPRIDIUM AND BENZOCAINE LOZ CEPACOL ANESTH LOZ CHLORPHENIRAMINE/PSEUDOEPHEDRINE SR CAPS DECONAMINE SR CHLORPHENIRAMINE MALEATE TAB 4 MG CHLORTIMETRON, CTM DIPHENHYDRAMINE 25 MG CAPS USP **BENADRYL** GUAIFENESIN SYRUP/DEXTROMETHORPHAN ROBITUSSIN DM GUAIFENESIN SYRUP USP **ROBITUSSIN** GUAIFENESIN 600 MG LONG-ACTING TABS **HUMIBID-LA** GUAIFENISIN/PSEUDOEPHEDRINE LA TABS DECONASAL II OXYMETAZOLONE HCL NASAL SOL 0.05% **AFRIN** PSEUDOEPHEDRINE & TRIPROLIDINE TABS ACTIFED PSEUDOEPHEDRINE & TRIPROLIDINE SYRUP ACTIFED SYRUP PSEUDOEPHEDRINE 30 MG TABS **SUDAFED** PSEUDOEPHEDRINE 60 MG TABS **SUDAFED**

SODUIM CHLORIDE NASAL SOLN 0.65% SALINE NASAL SPRAY/DROPS

^{*}Albuterol inhalers should be used for the treatment of acute asthma or shortness of breath. It is not intended that the HS be permitted to treat chronic asthma or chronic respiratory conditions. A medical officer should be consulted as soon as feasible for any patient requiring acute treatment with an albuteral inhaler or nebulizing solution.

GENERIC NAME

BRAND NAME

GASTROINTESTINAL PRODUCTS

AL/MG HYDROX W SIMETH DS SUSP MAALOX II/MYLANTA II
AL/MG HYDROX W SIMETH DS CHEWABLE TAB MAALOX II/MYLANTA II

BISMUTH SUBSALICYLATE 262MG TABS PEPTO-BISMOL CHARCOAL IN WATER, 240ML ACTIDOSE-AQUA

DICYCLOMINE HCL CAPS 10MG

DOCUSATE SODIUM CAPS USP, 100 MG

EPHEDRINE SULF CAPS 25 MG

HYDROCORTISONE ACET SUPPOSITORIES

IPECAC SYRUP, USP 7%

IPECAC SYRUP

MACHENIA PROCEDUM WATER 52.2 CM

KAOLIN-PECTIN MIXTURE 53.2 GM

LOPERAMIDE HCL 2 MG CAPS

KAOPECTATE

IMODIUM

MECLIZINE 25 MG TABS, CHEWABLE
PROMETHAZINE HCL TABS USP 25 MG
PROMETHAZINE HCL INJ 25MG/ML
PROMETHAZINE HCL 25MG SUPPOSITORIES
PSYLLIUM HYDROPHILIC MUCILLOID
BONINE, ANTIVERT
PHENERGAN TABS
PHENERGAN INJ
PHENERGAN SUPP
METAMUCIL

RANITIDINE HCL 150MG TABS

METAMUCI
ZANTAC

SCOPALAMINE TRANSDERMAL PATCH TRANSDERM-SCOP SODIUM PHOSPHATES ENEMA, DISPOSABLE FLEETS ENEMA

GYNECOLOGICAL PRODUCTS / CONTRACEPTIVES

CLOTRIMAZOLE VAGINAL CREAM, 1%, W APPL GYNE-LOTRIMIN

CONDOM, MALE CONDOM

CONDOM, FEMALE REALITY FEMALE CONDOM

CONTRACEPTIVE FOAM DELFEN

IMMUNIZATIONS

*The immunizations listed here may be administered by health services technicians as per authorized immunizations requirements.

*HEPATITIS A VIRUS VACCINE VAQTA, HAVRIX

*HEPATITIS B VIRUS VACCINE ENGERIX-B, RECOMBIVAX-HB

(COMBINATION HEPATITIS A & B VACCINE MAY BE USED AS APPROPRIATE)
*INFLUENZA VIRUS VACCINE FLU VACCINE

*MEASLES, MUMPS AND RUBELLA VIRUS VACCINE, LIVE MMR II

*MENINGOCOCCAL POLYSACCHARIDE VACCINE MENOMUNE-A/C/Y/W-135

*POLIO VIRUS VACCINE, INACTIVATED

*TETANUS & DIPHTHERIA TOXOID USP

TD

*TUBERCULIN INJ USP APLISOL, TUBERSOL

*TYPHOID INACT. VACCINE INJ

*VARICELLA VACCINE

VARIVAX

*YELLOW FEVER VACCINE YELLOW FEVER VACCINE

GENERIC NAME

BRAND NAME

MISCELLANEOUS PRODUCTS

DEXTROSE INJ 5% USP D5W DIPHENHYDRAMINE 50MG/ML INJ **BENADRYL** GLUCOSE 40% GEL **INSTA-GLUCOSE** NALOXONE HCL INJ 0.4MG/ML **NARCAN** OXYGEN, MEDICAL **OXYGEN** RINGERS INJ., LACTATED RINGERS LACTATE, LR SODIUM CHLORIDE INJ 0.9% NORMAL SALINE, NS WATER FOR INJECTION, STERILE STERILE WATER FOR INJ

MUSCLE RELAXANTS

METHOCARBAMOL 500 MG TABS ROBAXIN

OPHTHALMIC PRODUCTS

ARTIFICIAL TEARS SOL, 15 ML

FLUORESCEIN SODIUM OPHTH STRIPS, 1 MG

GENTAMICIN 0.3% OPHTH OINTMENT

NAPHAZOLINE/ANTAZOLINE OPHTH SOLN

TETRAHYDROZALINE HCL 0.05% OPHTH SOL

VISINE

OTIC PRODUCTS

ALUMINUM ACETATE/ACETIC ACID SOLN

CARBAMIDE PEROXIDE OTIC SOLN

NEOMYCIN/POLYMYX/HYDROCORT OTIC SUSP

DOMEBORO

DEBROX

CORTISPORIN OTIC

GENERIC NAME

TOPICAL PRODUCTS ALCOHOL, ISOPROPYL USP

ALUMINUM ACETATE SOL TABS EFFERV

BACITRACIN OINT USP

BENZOYL PEROXIDE 10% GEL

CALAMINE LOTION USP

CLOTRIMAZOLE 1% TOPICAL CREAM DIBUCAINE OINT 1%, W APPLICATOR HYDROCORTISONE CREAM 1% USP

HYDROGEN PEROXIDE 3% SOL USP

LIPSTICK, ANTICHAP 4.2 GM

METHYL SALICYLATE/MENTHOL OINT

PAD, ISOPROPYL ALCOHOL 100'S

PERMETHRINS CREAM 5% PERMETHRINS SHAMPOO 1%

PETROLATUM JELLY, WHITE, USP

POVIDONE IODINE SCRUB USP, 7.5% POVIDONE IODINE SOL USP, 10%

SALICYLIC ACID 15% TRANSDERMAL PATCH

SALICYLIC ACID 16% TOPICAL SOL'N SELENIUM SULFIDE LOTION 2.5%

SODIUM CHLORIDE IRRIGATION

SULFADIAZINE SILVER 1% CREAM

SUNSCREEN PREP LOTION SURGICAL LUBRICANT

TOLNAFTATE 1% CREAM

TOLNAFTATE 1% POWDER, USP TOLNAFTATE 1% TOPICAL SOL USP

WATER FOR IRRIGATION, STERILE

WITCH HAZEL-LANOLIN PADS

VITAMIN / MINERAL PRODUCTS

MULTIVITAMIN TABLETS

MULTIVITAMIN TABLETS WITH 1 MG FOLIC ACID

BRAND NAME

RUBBING ALCOHOL

DOMEBORO TABS BACITRACIN

OXY-10

CALAMINE

LOTRIMIN, MYCELEX

NUPERCAINAL HYTONE, HC 1%

HYDROGEN PEROXIDE

CHAPSTICK BENGAY

ALCOHOL PADS

ELIMITE

NIX

VASELINE BETADINE SCRUB

BETADINE SOLN

TRANS-VER-SAL

DUOFILM SELSUN

NORMAL SALINE IRRG SOLN

SILVADENE PRESUN SURGILUBE

TINACTIN

TINACTIN

TINACTIN

STERILE WATER FOR IRRG

TUCKS PADS

ONE-A-DAY